

L.A. Unified School

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WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. \_\_\_\_\_ Company \_\_\_\_\_

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the county building inspection department.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number \_\_\_\_\_ Lic. Class \_\_\_\_\_

Contractor \_\_\_\_\_ Date \_\_\_\_\_

☐ I am exempt under Sec. \_\_\_\_\_

B.&P.C. for this reason \_\_\_\_\_

Date: \_\_\_\_\_

Signature \_\_\_\_\_

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name \_\_\_\_\_

Lender's Address \_\_\_\_\_

I certify that I have read this application and state that the above information is correct. I agree to comply with all County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent

Date

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN						BUILDING ADDRESS	
BUILDING ADDRESS						1135 Stringer Ave.	
CITY						LOCALITY	
L.A.						L.A.	
ZIP						NEAREST CROSS ST.	
1RREGULAR						Harris Ave.	
NO. OF BLDGS. NOW ON LOT						ASSESSOR MAP BOOK	
5920						5230	
BLOCK 19						PAGE	
LOT NO. 9						PARCEL 9	
OWNER						USE ZONE	
RUIZ PHILLIPS						R-2	
TEL. NO.						MAP NO.	
322 N. CHICAGO						3201	
ADDRESS						SPECIAL CONDITIONS	
L.A.						PP. 35105	
CITY						DISTRICT	
L.A.						30	
ARCHITECT OR ENGINEER						GROUP	
URIU ASSOCIATES						R-3	
TEL. NO. 2182472						TYPE CONST.	
030 So GLENDALE						I-N	
ADDRESS						FIRE ZONE	
CONTRACTOR						III	
DESIGN CON. TEL. NO. 2664113						PROCESSED BY	
ADDRESS						STATISTICAL CLASSIFICATION	
413 So INDIANA TEL. NO. 220273						CLASS NO. 01	
CITY						DWELL. UNITS	
L.A.						+1	
LIC. CLASS						SEWER MAP	
BI						BK. PG. 54	
SQ. FT. SIZE						VALUATION	
885						\$ 52000.00	
NO. OF STORIES							
1							
NO. OF FAMILIES							
1							
CHECK ONE							
DESCRIPTION OF WORK						NEW <input checked="" type="checkbox"/>	
3 BDRM 2 BATHS #						ADD <input type="checkbox"/>	
2 CAR GARAGE ATTACHED						ALTER <input type="checkbox"/>	
USE OF EXISTING BLDG.						REPAIR <input type="checkbox"/>	
APPLICANT (PRINT)						DEMOL <input type="checkbox"/>	
OSCAR SALMONES						FINAL DATE	
TEL. NO. 2664113						FINAL By	
ADDRESS							
413 So INDIANA L.A.							
PRESENT BUILDING ADDRESS							
LOCALITY							
MOVING CONTRACTOR							
TEL. NO.							
ADDRESS							
REQUIRED SET BACK							
YARD							
HWY							
TOTAL SETBACK FROM PROP. LINE							
EXIST. WIDTH							
FRONT P.L.						30	
SIDE P.L.							
P.C. Fee \$						Permit Fee	
265.20							
Investigation Fee						Issuance Fee	
Total Fee						LDMA Ref. #	
						LDMA P/C #	
						LDMA Perm. #	

INSPECTOR COPY

VALIDATION

No. 1396 A  
#...23  
1-26520  
..26520  
3-18-87

Expired  
4-8-88  
Notice sent  
1-11-88  
P. Lee

SEE REVERSE FOR EXPLANATORY LANGUAGE